

DIRECTOR'S REPORT

No comparison can say what happened to us. But we can start with the ruins of our similes and let like move us toward something larger, some understanding of what is.¹ A Center staff member whispered, "Today everyone's heart is shattered," as members of the Center joined our colleagues worldwide, in grieving, in attempting to honor what should be honored, in grappling with the immensity of what has happened, in trying to move "toward some larger understanding of what is"—now.

We must discern, in this fractured social and moral landscape, how our Jesuit tradition will help us engage vigorously and respectfully in local, national and international dialogue. Margaret Steinfelds writes: "A tradition is not a browned and dried up certificate of deposit in the bank of knowledge, but a locus for questioning, a framework for ordering inquiry, a standard for preferring some sets of ideas over others."² Our tradition requires us to persevere in the everyday issues and challenges of the Center.

Still, our everyday activities are affected. Creighton president, Father John Schlegel reminds us to "recommit ourselves to... international understanding made possible by the valued presence of international students, faculty and staff on our campus... [and] to inter-religious dialogue... we... must work even harder against the global injustice that provides fertile ground for terrorism and violence."



I have asked several Center members to reflect on what these events mean to them. One comments:

A foundation of Jesuit education is Cura Personalis — care and development of the whole person, for each member of the community. My ethics courses reflect this value as I assist students to identify the ethical aspects of their lives and to lead better lives. The tragic events of September 11 only deepen my desire to make students more aware of the individual, institutional and societal choices that they make every day. My students are from all parts of the world, of different faiths, and ages. To teach the whole person within a diverse community is my challenge.

And yet another:

One of the most striking sequelae of September 11 is the worldwide demonstration of solidarity that transcends family, friends, faiths and nations. It manifests itself in the altruism of firemen and rescue workers, in the care-giving of health professionals and others, with plane passengers who foiled a fourth attack;

in those who donated blood, in the generosity of those from other nations who give to survivor relief funds. It is apparent in expressions of sympathy and concern that came to us in the Center from all over the world; in ecumenical prayer services, in the reaching out to our Muslim friends and colleagues to assure them that we remain one with them — one people of God.

Our solidarity should also extend to those who hate, revile and attack us. We need not render ourselves defenseless against those who assault us. But we ought not succumb to the hatred that tortures them. The ability to help someone change, to become a more integrated part of humanity, is a far greater power than the power to restrain, to punish, to destroy, to kill.

We remain profoundly unchanged and changed — scholars, teachers, providers of ethics consultation, and staff members — whose professional home provides occasion for mutual support and dialogue. We welcome your input, your visits and your on-going commitment to the best of what this opportunity offers — now.

Ruth Purtilo, Ph.D.

¹ Powers, Richard, "The Simile" *New York Times* on the Web September 23, 2001.

² Steinfelds, Margaret, "The Catholic Intellectual Tradition" *Origins*, Vol. 25: No 11, p 169.

12th Annual Women and Health Lecture Women and Spiritual Health

*Dr. Maryanne Stevens, RSM
President, College of St. Mary*

Prayer and spirituality are integral to health.

Although the phrase 'health of mind, body and spirit' has become common in mission statements and ads for best selling books on leadership and health, few in our culture are really comfortable talking about the health of our spirit," offered Dr. Maryanne Stevens, RSM, President of the College of St. Mary, as she presented the 12th annual Women and Health Lecture in September. Spirituality can provide us with a strong sense of health and enable us to get in touch with our creative power as well as being morally energizing. However, attaining such spiritual health requires reflection, an investment in ourselves first, in order to subsequently reach out to others.

Stevens opened with a brief autobiographical account that included a recollection of how her mother took quiet time for herself. After the evening meal, the older children in the family had the responsibility of helping the younger ones with homework and preparation for bed. The regular evening ritual for Stevens' mother was washing the dinner dishes — that moment of solitude in which she centered herself.

Stevens spoke of spirituality as a general capacity for self-transcendence, an ability to act out of the center of one's self, for others. Before we can go out to others, be charitable, loving and work for peace, we need to have a good sense of ourselves, our own power and creativity — be spiritually healthy. We first need a self before we can

transcend. She cautioned against striving for a loss of self in order to be spiritual. Self-sacrifice, Stevens argues, is decidedly not the path to spiritual health. For many reasons, we expect women to sacrifice their own goals in life. But this is a dangerous mistake. We cannot transcend self for others unless there is a whole self to do the relating. We are unique creatures and we realize our particularity through relationships with others. Women have the potential to grow in otherness. At least two research studies reinforce this idea.

According to Stevens, results from one study focusing on the brain, showed a larger forebrain in women, thereby providing them with the cognitive skills to network, to do multi-tasking, to handle a variety of information and to order disparate input. The second study explored moral development in girls. Carol Gilligan's research provided evidence that women's moral responsibility is fundamentally influenced by relationships and ties with others. Women in Gilligan's



Dr. Maryanne Stevens

study did not generally find isolation, abstraction, and principles as appealing as did the men in the research on moral development done by Lawrence Kohlberg's that both preceded and instigated Gilligan's project.

These gifts that women bring to their own lives and those of others, enable them to make a positive difference in the world. Women must maintain a sense of self in order to sustain spiritual health, and those choices about nourishing relationships are the most important. Moreover, relationships are not limited to the interpersonal, but extend to those beyond a woman's immediate presence. It is the use of a woman's particular creativity in those more distant relationships that engender attempts to accomplish the larger goals of world peace and respect for the earth's environment. Such endeavors begin when women learn to reflect in the presence of noise and distraction, to invest in themselves.

Life for many women has become a moving sidewalk on which they are not only carried on by the motion of the track but also find themselves rushing along the path to move even faster than the mechanism propels them. For spiritual health, the central relationship is formed with the spirit — a relationship that is a stretch, but that is within reach. A woman's creativity is oriented to the power of this spirit and through relationships, they can respond to the call to spiritual health.

*Winifred J. Ellenchild Pinch,
Ed.D., R.N.*



American Society for Bone and Mineral Research Sponsored Conference

The Creighton Osteoporosis Research Center is internationally known for its contributions to the understanding and treatment of osteoporosis, a bone-wasting disease. The disease is responsible for significant morbidity and mortality among the elderly, especially women. Significant advances have been made recently in reducing fractures in osteoporosis sufferers using treatments proven in trials that use placebo controls.

In 2000 the World Medical Association revised the Declaration of Helsinki. One article states, "The benefits, risks, burdens and effectiveness of a new method should be tested against those of the best current prophylactic, diagnostic, and therapeutic methods. This does not exclude the use of placebo -- or no treatment -- in studies where no proven prophylactic, diagnostic or therapeutic method exists." This position has created concern about the use of placebo controls to test new agents when effective, or partially effective, therapeutic agents are known.

Concern arises because adequate therapies reduce fracture incidence by only 30-50% and have significant side effects. Serious methodological difficulties exist in trials that use known active therapies as controls. Thus we may be at a point where development and testing of more beneficial agents, and/or those having fewer side effects, is not feasible.

Concerned with the possibility of frustrating advances in osteoporosis research, Dr. Robert Recker, director of the Creighton Osteoporosis Research Center, turned to Dr. Ruth

Purtilo and the Center for Health Policy and Ethics. The Center convened a group of prominent ethicists to examine whether, or under what circumstances, use of placebo controls in osteoporosis clinical trials is ethical. Dr. Recker obtained support for the conference from the American Society for Bone and Mineral Research, of which he is president-elect. Participants included: Baruch Brody, PhD, Baylor and Rice Universities; Nancy Dickey, MD, Texas A&M University, who chaired the World Medical Association Task Force that wrote the revised Declaration of Helsinki; Susan Ellenberg, PhD, Food and Drug Administration, an expert in clinical trial design; Robert Levine, MD, Yale University, a member of the WMA Task Force; Robert Marcus, MD, Stanford University, an osteoporosis researcher; Nelson Watts, MD, osteoporosis researcher; and Charles Weijer, MD, PhD, Dalhousie University. Creighton participants included Drs. Recker, Robert Heaney, Ruth Purtilo and Richard O'Brien.

It will not surprise ethics watchers that, despite significant points of agreement, it is often difficult for bioethicists and clinical scientists to concur. All participants agreed that the latitude for use of placebo controls is narrowed significantly by the development of effective fracture reducing therapies for osteoporosis.

Participants discussed the potential for broadening placebo control use by diminishing risk to research subjects; finding research end points other than fractures; determining greater efficacy or

safety of new agents in preclinical studies; assuring that subjects are well informed and given the opportunity for existing therapies rather than participating in a study. Findings of this group will be reported to the American Society for Bone and Mineral Research. In order to provide guidance for those conducting clinical trials in osteoporosis and other areas confronting similar problems, findings will be submitted for publication.

Richard L. O'Brien, M.D.

Calendar of Events

Thomas Timothy Smith Lecture:

The Role of Scholars
in Controversial Health Care
and Policy Debates
Robert P. George, PhD
Princeton University
Co-sponsored with
Department of Medicine
and School of Law
Wednesday, November 7, 2001
12:00 - 1:00 pm
Boys Town National Research
Hospital Auditorium

Clinical Ethics Series:

Discussing end of life issues
of cancer patients.
Co-sponsored with
OB-GYN Department
Ruth B. Purtilo, PhD
Wednesday, December 12, 2001
12:00 - 1:00 pm
Location: TBA

Opportunities for Women - A Reflection

It seems like yesterday that I was elected to the All University Committee on the Status of Women, and now my three-year term has ended. This committee encourages discussion around issues relevant to the needs of women in the Creighton and Omaha communities. Thanks to the Staff Advisory Council for giving me the opportunity to be a staff representative.

As I look back, I feel honored to have had an opportunity to become acquainted with individuals from across campus whom I otherwise would not have had the opportunity to know. It felt good to be part of this group that cares and that makes things better for women. My exposure to these people increased my awareness of the many opportunities for women available on campus.

We sponsored several projects and put on events throughout the year. The Mary Lucretia Creighton award luncheon recognizes outstanding individuals within the Creighton community. Reviewing the nominations for this prestigious award renewed my sense of admiration for the extraordinary accomplishments of these individuals. We sponsored a Women's Mentoring Program and the Women's Resource Center where students, faculty and staff can go to obtain resources about women, to name just a few of our efforts.

I look forward to the future of the All University Committee on the Status of Women. They will "move and groove" with the support of President Schlegel as they create an increasingly energetic vision of what they have yet to do.

Rita Nutty
CHPE Office Manager

PLEASE WELCOME...

In August of 2001, *Marybeth Goddard* joined the Center as Senior Administrative Assistant. Marybeth, her husband, Tim and their two children, Katie, 8 and Andrew, 6, moved to Omaha from Denver in October of 2000.



Marybeth graduated from Regis University in 1987 with a BS in Business Administration. Since college the majority of her experience has been in the managed care industry. Marybeth is excited about the opportunities that exist within Creighton and looks forward to being a part of a spiritually focused academic environment.

FOCUS

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Editor Ruth B. Purtilo, Ph.D.
Associate Editor Judith Lee Kissell, Ph.D.
Design & Layout O. R. Purula

Visit us online at:
<http://chpe.creighton.edu>

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Center for Health Policy and Ethics
2500 California Plaza
Omaha, Nebraska 68178

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